

SECURITY MATRIX

KEY PERSONNEL

Labor Category	Individual Proposed	Clearance type, Date Granted and if Terminated, Date of Termination	Location & Agency Issuing Clearance	Type and Date of Most Recent Background Investigation or Reinvestigation (e.g. OPM PRIS 5/94	Current Employee (Yes/No)**

** If No, attach original letter of commitment verifying availability

ATTACHMENT 6

DE-RP01-06SO20218

[illegible]